B1 (Official Fo	orm 1)(12	/11)								
					Bank		y Court York			Voluntary Petition
	Name of Debtor (if individual, enter Last, First, Middle): Ramos-Rios, Virginia						Name	e of Joint Do	ebtor (Spouse	se) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): AKA Virginia Ramos								e Joint Debtor in the last 8 years d trade names):		
Last four digits (if more than one, so	tate all)	Sec. or Indi	vidual-Taxp	ayer I.D. (ITIN) No./	Complete	EIN Last :	Cour digits of than one, state	of Soc. Sec. o	or Individual-Taxpayer I.D. (ITIN) No./Complete EI
Street Address 76-66 Aus Forest Hil	stin Stre		Street, City,	and State)	:	ZIP Co		t Address of	f Joint Debtor	or (No. and Street, City, and State): ZIP Code
						11375-6				ZIP Code
County of Res	idence or	of the Princ	cipal Place o	f Business				ty of Reside	ence or of the	ne Principal Place of Business:
Mailing Addre	ess of Deb	tor (if diffe	rent from str	eet addres	s):		Maili	ng Address	of Joint Deb	btor (if different from street address):
					Г	ZIP Co	de			ZIP Code
Location of Pr (if different fro				ŗ						
	• •	Debtor				of Busine	ess	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)		
(Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors			Sing in 1 Rail Stoo	Ith Care Bu tel Asset Ro I U.S.C. § road ekbroker amodity Bruring Bank er	ssiness eal Estate 101 (51B oker)	Chapt Chapt Chapt Chapt	ter 7 ter 9 ter 11 ter 12	☐ Chapter 15 Petition for Recognition of a Foreign Main Proceeding ☐ Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box)	
Country of debt Each country in by, regarding, o	which a fo	oreign procee	eding	unde	Tax-Exe (Check box or is a tax-ex r Title 26 of e (the Interna	t, if applicate applicate applicate the United the United	nble) nization States	defined "incuri	d in 11 U.S.C. red by an indiv	consumer debts,
debtor is una Form 3A. ☐ Filing Fee w	Fee attached to be paid in d application able to pay vaiver reque	installments in for the cou fee except in	art's considerate installments.	individual ion certifyi Rule 1006(7 individu	ng that the b). See Office als only). Mu	t Chec	Debtor is no ck if: Debtor's agg are less than ck all applicab A plan is be Acceptances	t a small busi gregate nonco \$2,343,300 (le boxes: ing filed with of the plan v	s debtor as definess debtor as entingent liquid amount subject this petition.	prepetition from one or more classes of creditors,
Statistical/Add ☐ Debtor esti ☐ Debtor esti there will b	imates tha imates tha	t funds will t, after any	be available	erty is ex	cluded and	administr		es paid,		THIS SPACE IS FOR COURT USE ONLY
1-	nber of Ci 50- 99	reditors 100- 199	200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000	
\$0 to	ets \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,00 to \$100 million	11 \$100,000,000 to \$500 million	1 \$500,000,001 to \$1 billion		
\$0 to	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,00 to \$100 million	100,000,00 to \$500 million	\$500,000,001 to \$1 billion		

B1 (Official Form 1)(12/11) Page 2 Name of Debtor(s): Voluntary Petition Ramos-Rios, Virginia (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. f X /s/ Melinda D. Middlebrooks, Esq. November 19, 2012 Signature of Attorney for Debtor(s) (Date) Melinda D. Middlebrooks, Esq. Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(12/11)	Page 3
Voluntary Petition	Name of Debtor(s): Ramos-Rios, Virginia
(This page must be completed and filed in every case)	Kanios-Kios, Virginia
	natures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached. ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
🗶 /s/ Virginia Ramos-Rios	X Signature of Foreign Representative
Signature of Debtor Virginia Ramos-Rios	Signature of Foreign Representative
	Printed Name of Foreign Representative
XSignature of Joint Debtor	Fillited Name of Potergii Representative
Digitative of voin Decici	Date
Telephone Number (If not represented by attorney)	Signature of Non-Attorney Bankruptcy Petition Preparer
November 19, 2012	Signature of Non-Autorney Dankruptcy reation rreparer
Date	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for
Signature of Attorney*	compensation and have provided the debtor with a copy of this document
orginature of recorney	and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated
X _/s/ Melinda D. Middlebrooks, Esq.	pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice
Signature of Attorney for Debtor(s)	of the maximum amount before preparing any document for filing for a
Melinda D. Middlebrooks, Esq. 4186	debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
Printed Name of Attorney for Debtor(s)	Official Form 17 is accurate.
Middlebrooks Shapiro, P.C. Firm Name	Printed Name and title, if any, of Bankruptcy Petition Preparer
1767 Morris Avenue, Suite 2A	
Union, NJ 07083-1716	Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition
Address	preparer.)(Required by 11 U.S.C. § 110.)
middlebrooks@middlebrooksshapiro.com (908) 687-6161 Fax: (908) 687-9090 Telephone Number	
November 19, 2012	
Date	Address
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	X
Signature of Debtor (Corporation/Partnership)	D ate
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. X Signature of Authorized Individual	not an individual:
Signature of Authorized murridual	If more than one person prepared this document, attach additional sheets
Printed Name of Authorized Individual	conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of
Title of Authorized Individual	title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Date

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of New York

In re	Virginia Ramos-Rios		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

Page 2
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); ☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling equirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Virginia Ramos-Rios Virginia Ramos-Rios
Date: November 19, 2012

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Eastern District of New York

In re	Virginia Ramos-Rios		Case No.	
		Debtor		
			Chapter	7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	172,000.00		
B - Personal Property	Yes	4	4,492.85		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		95,079.90	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		102,139.48	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			1,478.88
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,880.83
Total Number of Sheets of ALL Schedu	ıles	18			
	To	otal Assets	176,492.85		
			Total Liabilities	197,219.38	

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Eastern District of New York

In re	Virginia Ramos-Rios		Case No.		
-		Debtor			
			Chapter	7	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	1,478.88
Average Expenses (from Schedule J, Line 18)	2,880.83
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	2,444.00

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		102,139.48
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		102,139.48

B6A (Official Form 6A) (12/07)

In re	Virginia Ramos-Rios	Case No.	
-		, Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

76-66 Austir	n Street Apartment 3M, Forest Hills NY	Fee simple	_	172.000.00	95.079.90
1	Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 172,000.00 (Total of this page)

172,000.00

Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Virginia Ramos-Rios	Case No.	
_	-	Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.		Citibank checking account ending in 1992	-	724.31
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit	Citibank savings account ending in 2004 (zero balance)	-	0.00
	unions, brokerage houses, or cooperatives.	ING Direct savings account ending in 6531	-	51.04
		Crown Banking checking account ending in 619 (zero balance)	3 -	0.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Used: living room set, dining room set, two (2) bedroom sets, two (2) laptops, printer, televisior appliances, Location: 76-66 Austin Street 3M, Forest Hills N° 11375-6911		1,170.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Used: books Location: 76-66 Austin Street 3M, Forest Hills N 11375-6911	(100.00
6.	Wearing apparel.	Used: womens clothing Location: 76-66 Austin Street 3M, Forest Hills N' 11375-6911	-	250.00
7.	Furs and jewelry.	Used: costume jewelry Location: 76-66 Austin Street 3M, Forest Hills N' 11375-6911	-	150.00
8.	Firearms and sports, photographic, and other hobby equipment.	X		
			C 1 T	0.445.05

3 continuation sheets attached to the Schedule of Personal Property

2,445.35

Sub-Total >

(Total of this page)

In re	Virginia Ramos-Rios	Case No.
	_	

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	N V	lew York whole life policy (no cash out or loan alue until November 22, 2012 as it is a new policy)	-	0.00
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	x			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	N	lew York Life retirement plan	-	2,047.50
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.		Guardian Healing Closed in 2011 Tax Return indicates operating at a loss	-	0.00
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
			(Total	Sub-Tota of this page)	al > 2,047.50

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re	Virginia Ramos-Rios	Case No
	•	

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
		(To	Sub-Tot otal of this page)	al > 0.00

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Virginia Ramos-Rios	Case No
_		Debtor ,

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
34. Farm supplies, chemicals, and feed.	Х			_
35. Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > 0.00 | | (Total of this page) | | Total > 4,492.85 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/10)

In re	Virginia Ramos-Rios		Case No.	
_		Debtor	,,	

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box) 11 U.S.C. \$522(b)(2)	☐ Check if debtor claims a homestead exemption that exceeds \$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafte with respect to cases commenced on or after the date of adjustment.)
■ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property 76-66 Austin Street Apartment 3M, Forest Hills NY 11375-6911	NYCPLR § 5206	76,920.10	172,000.00
Checking, Savings, or Other Financial Accounts, Citibank checking account ending in 1992	Certificates of Deposit NYCPLR § 5205(a)(9)	724.31	724.31
ING Direct savings account ending in 6531	NYCPLR § 5205(a)(9)	51.04	51.04
Household Goods and Furnishings Used: living room set, dining room set, two (2) bedroom sets, two (2) laptops, printer, television, appliances, Location: 76-66 Austin Street 3M, Forest Hills NY 11375-6911	NYCPLR § 5205(a)(5)	1,170.00	1,170.00
Books, Pictures and Other Art Objects; Collectible Used: books Location: 76-66 Austin Street 3M, Forest Hills NY 11375-6911	es NYCPLR § 5205(a)(2)	100.00	100.00
Wearing Apparel Used: womens clothing Location: 76-66 Austin Street 3M, Forest Hills NY 11375-6911	NYCPLR § 5205(a)(5)	250.00	250.00
Furs and Jewelry Used: costume jewelry Location: 76-66 Austin Street 3M, Forest Hills NY 11375-6911	NYCPLR § 5205(a)(6)	150.00	150.00
Interests in IRA, ERISA, Keogh, or Other Pension New York Life retirement plan	or Profit Sharing Plans NY Ins. Law § 4607	2,047.50	2,047.50

Total: 81,412.95 176,492.85

DAD.	(Official	Farm	(D)	(12/07)

In re	Virginia Ramos-Rios		Case No	
		Debtor	,	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	I NGEN	А	S P U T F	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 5745925			Home Equity Line	▎▘▏	T E D			
Citibank, NA PO Box 688923 Des Moines, IA 50368		-	76-66 Austin Street Apartment 3M, Forest Hills NY 11375-6911		D			
			Value \$ 172,000.00	1			12,815.58	0.00
Account No. 2001187432-6	T		Mortgage	П			·	
CitiMortgage, Inc. PO Box 183040 Columbus, OH 43218		-	76-66 Austin Street Apartment 3M, Forest Hills NY 11375-6911					
			Value \$ 172,000.00	1			82,264.32	0.00
Account No.			Value \$					
Account No.	T			П		П		
			Value \$					
_0 continuation sheets attached			(Total of t	ubto			95,079.90	0.00
			(Report on Summary of Sc		ota ule		95,079.90	0.00

B6E (Official Form 6E) (4/10) In re Virginia Ramos-Rios Case No._ Debtor SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.) Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). ☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

0 continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re	Virginia Ramos-Rios		Case No.	
_		Debtor	,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

B6F (Official Form 6F) (12/07)

PO Box 1270 Newark, NJ 07101 - Credit Card Charges Banana Republic/GECRB PO Box 530942 Atlanta, GA 30353 Account No. 5490-9923-6400-1523 Bank of America PO Box 15019 Wilmington, DE 19886-5019 Credit Card Charges - Credit Card Charges								
Account No. ending in 6-21005	CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community	C	U	D	
Credit Card Charges	INCLUDING ZIP CODE, AND ACCOUNT NUMBER	DEBTOR	W J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE	T I N	LQU	SPUT	AMOUNT OF CLAIM
American Express PO Box 1270 Newark, NJ 07101 Account No. ending in 7792 Banana Republic/GECRB PO Box 530942 Atlanta, GA 30353 Bank of America PO Box 15019 Wilmington, DE 19886-5019 Credit Card Charges Credit Card Charges For Credit Card Charges Credit Card Charges For Credit Card Charge	Account No. ending in 6-21005			Credit Card Charges	T	T E		
Banana Republic/GECRB PO Box 530942 Atlanta, GA 30353 Account No. 5490-9923-6400-1523 Bank of America PO Box 15019 Wilmington, DE 19886-5019 Credit Card Charges 9,637.00 Account No. 4266-8510-5253-1396 Cardmember Service PO Box 15548 Wilmington, DE 19886-5548 Subtotal 5 continuation sheets attached	American Express PO Box 1270 Newark, NJ 07101		-			D		5,537.77
PO Box 530942 Atlanta, GA 30353 Account No. 5490-9923-6400-1523 Bank of America PO Box 15019 Wilmington, DE 19886-5019 Credit Card Charges - Credit Card Charges - Credit Card Charges - Credit Card Charges - Subtotal 18.011.87	Account No. ending in 7792	t		Credit Card Charges		┢		
Account No. 5490-9923-6400-1523 Bank of America PO Box 15019 Wilmington, DE 19886-5019 Account No. 4266-8510-5253-1396 Cardmember Service PO Box 15548 Wilmington, DE 19886-5548 Cardmember Service PO Box 15548 Wilmington, DE 19886-5548 Subtotal Subtotal 18 011 87	Banana Republic/GECRB PO Box 530942 Atlanta, GA 30353		-					
Bank of America PO Box 15019 Wilmington, DE 19886-5019 Account No. 4266-8510-5253-1396 Cardmember Service PO Box 15548 Wilmington, DE 19886-5548 Candinuation sheets attached Subtotal Subtotal 18 011 87								196.72
Account No. 4266-8510-5253-1396 Cardmember Service PO Box 15548 Wilmington, DE 19886-5548 Credit Card Charges - Subtotal 2,640.38	Account No. 5490-9923-6400-1523 Bank of America PO Box 15019 Wilmington, DE 19886-5019	_	-	Credit Card Charges				
Cardmember Service PO Box 15548 Wilmington, DE 19886-5548 2,640.38 Subtotal								9,637.00
5 continuation sheets attached 18 011 87	Account No. 4266-8510-5253-1396 Cardmember Service PO Box 15548 Wilmington, DE 19886-5548		-	Credit Card Charges				2,640.38
								18,011.87

In re	Virginia Ramos-Rios	Case No	
_		,	
		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Ç	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIGUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. 4147-2020-2512-5822			Credit Card Charges	T	T		
Cardmember Services P.O. Box 15548 Wilmington, DE 19886-5548		-			D		9,519.66
Account No. 5424-1805-9968-7974			Credit Card Charges				
Citi Cards PO Box 182564 Columbus, OH 43218		-					8,532.12
Account No. 5424-1804-6976-1131	┢	-	Credit Card Charges				,
Citi Cards PO Box 182564 Columbus, OH 43218		-	orean Sara Sharges				4,266.61
Account No. 5466-1600-8267-9281			Credit Card Charges				
Citi Cards PO Box 182564 Columbus, OH 43218		-					2,439.78
Account No. ending in 3301			Credit Card Charges				
Discover PO Box 71084 Charlotte, NC 28272-1084		-					4,388.45
Sheet no1 of _5 sheets attached to Schedule of				Subt			29,146.62
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	29,140.02

In re	Virginia Ramos-Rios		Case No.
_		Debtor	

	<u></u>	Lie.	ahand Wife Joint or Community	10	Τυ	Ь	<u> </u>
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	LIQUID	DISPUTED	AMOUNT OF CLAIM
Account No. 6045781010627908			Credit Card Charges	Т	E		
GECRB/Amazon PO Box 960013 Orlando, FL 32896-0013		-			D		1,254.89
Account No. 5140-2180-2172-5948	┢		Credit Card Charges	+	t	╁	
Juniper Card Services PO Box 13337 Philadelphia, PA 19101-3337		_					7,641.26
Account No.			Personal Loan				
Katherine M. Miller 1801/22-26 Clifton Road Clifton Beach, QLD 4879 Australia		-					3,000.00
Account No. Inv # 35067951	H		Medical Services	+	t	t	
Laboratory Corporation of America Holdings P.O. Box 2240 Burlington, NC 27216-2240		-					70.73
Account No. Inv # 00660383	<u> </u>	\vdash	Medical Services	+	t	\vdash	
Laboratory Corporation of America Holdings P.O. Box 2240 Burlington, NC 27216-2240		-					63.61
Sheet no. 2 of 5 sheets attached to Schedule of	-		1	Sub	tot	al	12 020 40
Creditors Holding Unsecured Nonpriority Claims			(Total o	f this	pa	ge)	12,030.49

In re	Virginia Ramos-Rios		Case No.	
_		Debtor	,	

		110	sband, Wife, Joint, or Community		111	ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	L H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXHLXGEX	Q U I	ローのPUTED	AMOUNT OF CLAIM
Account No. Inv # 04033543; 535; 537			Medical Services	Т	D A T E D		
Laboratory Corporation of America Holdings P.O. Box 2240 Burlington, NC 27216-2240		-					9.18
Account No. 81924333271971	t	T	Credit Card Charges				
Lowe's/GECRB Po Box 530914 Atlanta, GA 30353		-					
Account No.	┸						1,500.86
Midtown Integrative Health and Wellness 515 Madison Ave. 6th Floor New York, NY 10022		-	Medical Services				650.00
Account No.			Personal Loan				
Nereida Ramos 44 River Camp Drive Newington, CT 06111		-					25,000.00
Account No.	+	\vdash	Personal Loan	+			
Nery J. Ramos 76-66 Austin Street 5A Forest Hills, NY 11375		-					4,800.00
Sheet no. 3 of 5 sheets attached to Schedule of				Sub	tota	1	04 000 04
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	31,960.04

In re	Virginia Ramos-Rios		Case No.
-		D-1-4- ::	
		Debtor	

		_					
CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	S	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLLQULDA	SPUTED	AMOUNT OF CLAIM
Account No. 10666			Medical Services	T	A T E D		
Robert Bos, MD 515 Madison Avenue 6th Floor New York, NY 10022-5448		-			D		380.00
Account No. 6006101000628898			Credit Card Charges				
Tourneau PO Box 33802 Detroit, MI 48232-9998		-					0.422.70
							8,132.79
Account No. 799924 Village Park Medical, PC 31 Washington SQ W FL 4 New York 10011-9172		-	Medical Services				43.77
Account No. 531674			Medical Services				
Ward Carpenter, MD 314 W 14th St. 5th Floor New York, NY 10014-5002		-					136.00
Account No. 18-M102137074			Medical Services				
Weill Cornell Medical Col PO Box 27284 New York, NY 10087-7284		-					120.00
Sheet no. 4 of 5 sheets attached to Schedule of				Subt	ota	1	2 24 2 5 2
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	8,812.56

In re	Virginia Ramos-Rios		Case No.	
•		Debtor	,	

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CREDITOR'S NAME,	ŏ	Hu	sband, Wife, Joint, or Community	- 6	N	ľ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 5780979940187362			Medical Services	Т	T E		
WFCB - American Laser Skincare PO Box 659622 San Antonio, TX 78265-9622		-			D		1,746.27
Account No. 599027695	T		Credit Card Charges	\top			
WFNNB-Victoria's Secret P.O. Box 659728 San Antonio, TX 78265-9728		-	3				
							431.63
Account No. Account No.							
Account 1 to.							
Sheet no. <u>5</u> of <u>5</u> sheets attached to Schedule of			<u> </u>	Subt	tota	.1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				2,177.90
			(Report on Summary of So		ota lule		102,139.48

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

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•		
In re	Virginia Ramos-Rios	Case No.
_		Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

B6H (Official Form 6H) (12/07)

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

B6I (Offi	cial Form 6I) (12/07)			
In re	Virginia Ramos-Rios		Case No.	
		Debtor(s)	•	

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF	DEBTOR AND SE	POLISE		
Debtor's Maritar Status.	RELATIONSHIP(S):	AGE(S):	OCBE		
Widowed	None.	AGE(S).			
Employment:	DEBTOR	L	SPOUSE		
Occupation Sa	ales Agent				
Name of Employer N	ew York Life Insurance Company				
	months				
Address of Employer G	reater New York Office 20 Lexington Avenue, 15th Floor ew York, NY 10170				
	ojected monthly income at time case filed)		DEBTOR		SPOUSE
	ommissions (Prorate if not paid monthly)	\$	2,640.69	\$	N/A
2. Estimate monthly overtime		\$ _	0.00	\$	N/A
3. SUBTOTAL		\$_	2,640.69	\$	N/A
4. LESS PAYROLL DEDUCTIONS					
a. Payroll taxes and social securi	ty	\$	617.86	\$	N/A
b. Insurance		\$	270.00	\$	N/A
c. Union dues		\$	0.00	\$	N/A
d. Other (Specify): 401(k)		\$	273.95	\$	N/A
		\$ _	0.00	\$	N/A
5. SUBTOTAL OF PAYROLL DEDU	JCTIONS	\$_	1,161.81	\$	N/A
6. TOTAL NET MONTHLY TAKE H	IOME PAY	\$	1,478.88	\$	N/A
7. Regular income from operation of b	ousiness or profession or farm (Attach detailed statem	nent) \$	0.00	\$	N/A
8. Income from real property	1	\$	0.00	\$	N/A
9. Interest and dividends		\$	0.00	\$	N/A
dependents listed above	payments payable to the debtor for the debtor's use o	r that of	0.00	\$	N/A
11. Social security or government assi (Specify):		\$	0.00	\$	N/A
(Specify).		—	0.00	\$ 	N/A
12. Pension or retirement income			0.00	\$ 	N/A
13. Other monthly income		Ψ_	0.00	Ψ	14/4
(Specify):		\$	0.00	\$	N/A
		\$	0.00	\$	N/A
14. SUBTOTAL OF LINES 7 THROU	JGH 13	\$_	0.00	\$	N/A
15. AVERAGE MONTHLY INCOMI	E (Add amounts shown on lines 6 and 14)	\$_	1,478.88	\$	N/A
16. COMBINED AVERAGE MONTE	HLY INCOME: (Combine column totals from line 1:	5)	\$	1,478.8	88

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Debtor's income varies greatly as it is commission based. CMI was determined based on the average calculated from the Debtor's YTD income.

B6J (Off	icial Form 6J) (12/07)			
In re	Virginia Ramos-Rios		Case No.	
		Debtor(s)		

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time

case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22		verage monthly
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	631.31
a. Are real estate taxes included? Yes No X	' =====	
b. Is property insurance included? Yes NoX		
2. Utilities: a. Electricity and heating fuel	\$	87.00
b. Water and sewer	\$	0.00
c. Telephone	\$	125.00
d. Other Internet/tv/cable	\$	36.00
3. Home maintenance (repairs and upkeep)	\$	50.00
4. Food	\$	300.00
5. Clothing	\$	75.00
6. Laundry and dry cleaning	\$	11.00
7. Medical and dental expenses	\$	320.00
8. Transportation (not including car payments)	\$	242.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	40.00
10. Charitable contributions	\$	20.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	36.58
b. Life	\$	42.58
c. Health	\$	0.00
d. Auto	\$	0.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)	_	
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	<u>\$</u>	0.00
15. Payments for support of additional dependents not living at your home	\$ ———	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Co-op maintenance , gas, water, sewage, taxes	\$	864.36
Other	\$	0.00
- Culci	Ψ	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	2,880.83
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME	-	
a. Average monthly income from Line 15 of Schedule I	\$	1,478.88
b. Average monthly expenses from Line 18 above	\$	2,880.83
c. Monthly net income (a. minus b.)	\$	-1,401.95

c. Monthly net income (a. minus b.)

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Eastern District of New York

In re	Virginia Ramos-Rios			Case No.	
			Debtor(s)	Chapter	7
	DECLARATION C	ONCEDA	INIC DEPTODIC CO		F.C
	DECLARATION C	UNCERN	ING DEPIOR 2 20	HEDULI	79
	DECLARATION UNDER F	PENALTY (OF PERJURY BY INDIV	DUAL DEF	STOR
	I declare under penalty of perjury the sheets, and that they are true and correct to the				es, consisting of20
Date	November 19, 2012	Signature	/s/ Virginia Ramos-Rios Virginia Ramos-Rios Debtor	5	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (04/10)

United States Bankruptcy Court Eastern District of New York

In re	Virginia Ramos-Rios		Case No.	
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$40,654.00 2011: Debtor Adjusted Gross Income \$62,351.00 2010: Debtor Adjusted Gross Income \$13,352.00 2009: Debtor Adjusted Gross Income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

2

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF

TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

NI---- 1

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF **ORDER**

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION India Marie Shandu Unknown

RELATIONSHIP TO DEBTOR, IF ANY None

DATE OF GIFT **April 2012**

DESCRIPTION AND VALUE OF GIFT Tourneau Watch valued at

\$6.989.13 in exchange for lifting malific influence.

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Middlebrooks Shapiro, P.C. 1767 Morris Avenue, Suite 2A Union, NJ 07083-1716

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

\$2,500.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

4

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NAME **Guardian Healing**

(ITIN)/ COMPLETE EIN

7139

ADDRESS NATURE OF BUSINESS

76 - 66 Austin Street, Apt. Complimentary medicine and energy 3M

Forest Hills, NY 11375-6911 healing

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME **ADDRESS**

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

DATES SERVICES RENDERED NAME **ADDRESS**

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was

issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

6

BEGINNING AND

ENDING DATES

2008 to 2011

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NATURE OF INTEREST NAME AND ADDRESS

PERCENTAGE OF INTEREST

7

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns. None

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

ADDRESS DATE OF WITHDRAWAL NAME

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date November 19, 2012 /s/ Virginia Ramos-Rios Signature

Virginia Ramos-Rios

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

United States Bankruptcy Court Eastern District of New York

	Eastern Distri	Ct Of INCW I	UIK			
In re Virginia Ramos-Rios				Case No.		
	Ι	Debtor(s)		Chapter	7	_
CHAPTER 7 IN	DIVIDUAL DEBTO	R'S STATE	EMENT O	F INTEN	TION	
PART A - Debts secured by property of property of the estate. Attach a			completed	for EACI	H debt which is secured by	
Property No. 1						
Creditor's Name: Citibank, NA		Describe Pro 76-66 Austin 11375-6911			: 1, Forest Hills NY	
Property will be (check one):						-
☐ Surrendered	■ Retained					
If retaining the property, I intend to (check ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain ☐ Property is (check one):	at least one): (for example, avo	id lien using 1	11 U.S.C. §	522(f)).		
Property is (check one): Claimed as Exempt		□ Not alaim	ad as avamr	.+		
- Claimed as Exempt		☐ Not claime	ied as exemp)t		_
Property No. 2						
Creditor's Name: CitiMortgage, Inc.		Describe Pro 76-66 Austin 11375-6911			: 1, Forest Hills NY	
Property will be (check one): ☐ Surrendered	■ Retained					_
If retaining the property, I intend to (check ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain	at least one): (for example, avo	id lien using 1	11 U.S.C. §	522(f)).		
Property is (check one):						
■ Claimed as Exempt		□ Not claime	ed as exemp	ot		
PART B - Personal property subject to une Attach additional pages if necessary.)	xpired leases. (All three	columns of Pa	art B must b	e complete	ed for each unexpired lease.	
Property No. 1						_
Lessor's Name: -NONE-	Describe Leased Pro	perty:	U	ease will be S.C. § 365 YES	e Assumed pursuant to 11 (p)(2):	

Page 2

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date November 19, 2012

Signature /s/ Virginia Ramos-Rios

Virginia Ramos-Rios

Debtor

United States Bankruptcy Court Eastern District of New York

In re	Virginia Ramos-Rios		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR D	EBTOR(S)
c	rursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b) ompensation paid to me within one year before the filing of e rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptc	y, or agreed to be pai	d to me, for services rendered or to
	For legal services, I have agreed to accept		\$	2,500.00
	Prior to the filing of this statement I have received		\$	2,500.00
	Balance Due		\$	0.00
2. \$				
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed compensation	tion with any other perso	on unless they are mer	nbers and associates of my law firm
[☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of			
6. I	n return for the above-disclosed fee, I have agreed to render	legal service for all aspe	ects of the bankruptcy	case, including:
b c d	 Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statemer Representation of the debtor at the meeting of creditors ar Representation of the debtor in adversary proceedings and [Other provisions as needed] Representation of the Debtor at the Meeting 	nt of affairs and plan whi nd confirmation hearing, d other contested bankrup	ch may be required; and any adjourned he ptcy matters;	arings thereof;
7. B	by agreement with the debtor(s), the above-disclosed fee doe Representation of the debtors in any discha any other adversary proceeding, amendmen secured creditors to reduce to market value agreements and applications as needed; or	argeability actions, ju nts, sale motions, mo o; exemption planning	dicial lien avoidan tions relating to re g; preparation and	affirmation, negotiations with filing of reaffirmation
	Cl	ERTIFICATION		
	certify that the foregoing is a complete statement of any agrankruptcy proceeding.	eement or arrangement fo	or payment to me for	representation of the debtor(s) in
Dated	November 19, 2012	Melinda D. Midd Middlebrooks S 1767 Morris Avo Union, NJ 0708 (908) 687-6161	Shapiro, P.C. enue, Suite 2A	90

United States Bankruptcy Court Eastern District of New York

In re	Virginia Ramos-Rios		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date:	November 19, 2012	/s/ Virginia Ramos-Rios	
		Virginia Ramos-Rios	
		Signature of Debtor	
Date:	November 19, 2012	/s/ Melinda D. Middlebrooks, Esq.	
		Signature of Attorney	
		Melinda D. Middlebrooks, Esq.	
		Middlebrooks Shapiro, P.C.	
		1767 Morris Avenue, Suite 2A	
		Union, NJ 07083-1716	
		(908) 687-6161 Fax: (908) 687-9090	

USBC-44 Rev. 9/17/98

Allied Intersate P.O. Box 1954 Southgate, MI 48195-0954

AMCA PO Box 1235 Elmsford, NY 10523-0935

American Express PO Box 1270 Newark, NJ 07101

Banana Republic/GECRB PO Box 530942 Atlanta, GA 30353

Bank of America PO Box 15019 Wilmington, DE 19886-5019

Capital Management Servic 726 Exchange Street Suite 700 Buffalo, NY 14210

Cardmember Service PO Box 15548 Wilmington, DE 19886-5548

Cardmember Services P.O. Box 15548 Wilmington, DE 19886-5548

Citi Cards PO Box 182564 Columbus, OH 43218

Citibank, NA PO Box 688923 Des Moines, IA 50368

CitiMortgage, Inc. PO Box 183040 Columbus, OH 43218 Comenity Company PO Box 182125 Columbus, OH 43218-2125

Discover PO Box 71084 Charlotte, NC 28272-1084

GC Services Limited Partn 6330 Gulfton Houston, TX 77081

GECRB/Amazon PO Box 960013 Orlando, FL 32896-0013

Juniper Card Services PO Box 13337 Philadelphia, PA 19101-3337

Katherine M. Miller 1801/22-26 Clifton Road Clifton Beach, QLD 4879 Australia

Laboratory Corporation of America Holdings P.O. Box 2240 Burlington, NC 27216-2240

Lowe's/GECRB Po Box 530914 Atlanta, GA 30353

Midtown Integrative Health and Wellness 515 Madison Ave. 6th Floor New York, NY 10022

Nereida Ramos 44 River Camp Drive Newington, CT 06111 Nery J. Ramos 76-66 Austin Street 5A Forest Hills, NY 11375

Northstar Location Servs Attn: Financial Services 4285 Genesee Street Cheektowaga, NY 14225-1943

Robert Bos, MD 515 Madison Avenue 6th Floor New York, NY 10022-5448

Tourneau PO Box 33802 Detroit, MI 48232-9998

Village Park Medical, PC 31 Washington SQ W FL 4 New York 10011-9172

Ward Carpenter, MD 314 W 14th St. 5th Floor New York, NY 10014-5002

Weill Cornell Medical Col PO Box 27284 New York, NY 10087-7284

WFCB - American Laser Skincare PO Box 659622 San Antonio, TX 78265-9622

WFNNB-Victoria's Secret P.O. Box 659728 San Antonio, TX 78265-9728

Case 1-12-47952-nhl Doc 1 Filed 11/19/12 Entered 11/19/12 11:20:57

B22A (Official Form 22A) (Chapter 7) (12/10)

In re Virginia Ramos-Rios	
Debtor(s)	According to the information required to be entered on this statement
Case Number:	(check one box as directed in Part I, III, or VI of this statement):
(If known)	☐ The presumption arises.
	■ The presumption does not arise.
	☐ The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
171	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

		Part II. CALCULATION OF I	MOI	NTHLY INC	CON	ME FOR § 707(b)('	7) E	EXCLUSION	
	Mari	ital/filing status. Check the box that applies	and	complete the ba	lanc	e of this part of this state	emen	at as directed.	
	a.	Unmarried. Complete only Column A ("	Debte	or's Income'') f	or L	Lines 3-11.			
2	b. \square Married, not filing jointly, with declaration of separate households. By checking this "My spouse and I are legally separated under applicable non-bankruptcy law or my spourpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete Lines 3-11.					otcy law or my spouse an	ıd I a	re living apart of	ther than for the
	(Married, not filing jointly, without the dec ("Debtor's Income") and Column B ("Spe	ouse's	s Income") for	Line	es 3-11.			
		Married, filing jointly. Complete both Co					Spo	use's Income'') i	for Lines 3-11.
		gures must reflect average monthly income						Column A	Column B
	calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the							Debtor's	Spouse's
		nonth total by six, and enter the result on the						Income	Income
3	Gros	s wages, salary, tips, bonuses, overtime, c	ommi	ssions.			\$	2,444.00	\$
		me from the operation of a business, profe							
		the difference in the appropriate column(s)							
		ness, profession or farm, enter aggregate nun nter a number less than zero. Do not includ							
4		b as a deduction in Part V.		part of the se		sss emperiors emerce on			
				Debtor		Spouse			
	a.	Gross receipts	\$.00				
	b. c.	Ordinary and necessary business expenses Business income		btract Line b fr			\$	0.00	•
	_						Ψ	0.00	Ψ
	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any								
		part of the operating expenses entered on Line b as a deduction in Part V.							
5				Debtor		Spouse			
	a.	Gross receipts	\$.00				
	b. c.	Ordinary and necessary operating expense Rent and other real property income		btract Line b fr		· '	\$	0.00	\$
6	_	rest, dividends, and royalties.	150	iotract Line 5 ii		Zine u	\$	0.00	
7		ion and retirement income.					\$	0.00	
,			one	magular basis	for	the household	φ	0.00	9
	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that								
8	purp	ose. Do not include alimony or separate ma	intena	ince payments of	or an	nounts paid by your			
		se if Column B is completed. Each regular progression is listed in Column A. do not report					\$	0.00	•
		ayment is listed in Column A, do not report nployment compensation. Enter the amoun		-			Ψ	0.00	Ψ
		ever, if you contend that unemployment con							
9	benef	fit under the Social Security Act, do not list	the a						
9	or B,	but instead state the amount in the space be	low:		1		ı		
		mployment compensation claimed to benefit under the Social Security Act Deb	tor \$	0.00	Spo	ouse \$	\$	0.00	¢
	_	, , , , , , , , , , , , , , , , , , ,	nd or	nount If magaz		list additional sources	φ	0.00	9
	on a s	me from all other sources. Specify source a separate page. Do not include alimony or se if Column B is completed, but include a	epara ll oth	ite maintenanc ier payments o	e pa f ali	yments paid by your mony or separate			
		tenance. Do not include any benefits receiv							
10	received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.				of international of				
				Debtor		Spouse			
	a.		\$			\$			
	b.		\$	<u> </u>		\$			
	Total	and enter on Line 10					\$	0.00	\$
11		otal of Current Monthly Income for § 707						0.444.00	ф
	i Colui	mn B is completed, add Lines 3 through 10	ın Co	lumn B. Enter	the t	total(s).	\$	2,444.00	3

3

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.			2,444.00	
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	1			
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the enter the result.	number 12 and	\$	29,328.00	
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: NY b. Enter debtor's household size:	1	\$	46,821.00	
Application of Section 707(b)(7). Check the applicable box and proceed as directed. The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.					

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULA	TION OF CUR	RENT	MONTHLY INCOM	ME FOR § 707(b)(2	2)
16	Enter the amount from Line 12.					\$
17	Marital adjustment. If you checked Column B that was NOT paid on a dependents. Specify in the lines bel spouse's tax liability or the spouse's amount of income devoted to each not check box at Line 2.c, enter zer	regular basis for the how the basis for exclusupport of persons of purpose. If necessary,	ouseho ding th ther tha	Id expenses of the debtor or e Column B income (such an the debtor or the debtor's	the debtor's as payment of the dependents) and the	
	a. b. c. d.			\$ \$ \$ \$		c
10	Total and enter on Line 17	(1) (A) (C 1) (A)	15.6	T. 12 1	1.	\$
18	Current monthly income for § 70°					\$
	Part V. C.	ALCULATION (OF DI	EDUCTIONS FROM	INCOME	
	Subpart A: Dec	luctions under Sta	ndard	s of the Internal Reveni	ue Service (IRS)	
National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.			\$			
19B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tay return, plus the number of any additional dependents whom					
	a1. Allowance per person		a2.	Allowance per person		
	b1. Number of persons c1. Subtotal		b2.	Number of persons		\$
Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.			\$			

20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.					
	a. IRS Housing and Utilities Standards; mortgage/rental expense b. Average Monthly Payment for any debts secured by your	\$				
	home, if any, as stated in Line 42	\$				
	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$			
21	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below:	led under the IRS Housing and Utilities	\$			
	Local Standards: transportation; vehicle operation/public transportation are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation.					
22A	Check the number of vehicles for which you pay the operating expense included as a contribution to your household expenses in Line 8.	es or for which the operating expenses are				
	☐ 0 ☐ 1 ☐ 2 or more. If you checked 0, enter on Line 22A the "Public Transportation" amou	nt from IRS Local Standards:				
	Transportation. If you checked 1 or 2 or more, enter on Line 22A the 'Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/ or	\$				
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)					
	\square 1 \square 2 or more.					
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Line the result in Line 23. Do not enter an amount less than zero.	ourt); enter in Line b the total of the Average				
	a. IRS Transportation Standards, Ownership Costs	\$				
	Average Monthly Payment for any debts secured by Vehicle	\$				
	b. 1, as stated in Line 42 c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$			
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Powership for any debta accuracy by Vehicle 2, as stated in Line 42; subtract Line b from Line and enterprise and enter					
24	the result in Line 24. Do not enter an amount less than zero.					
	a. IRS Transportation Standards, Ownership Costs \$					
	Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 42	\$				
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$			
25	Other Necessary Expenses: taxes. Enter the total average monthly ex state and local taxes, other than real estate and sales taxes, such as inco security taxes, and Medicare taxes. Do not include real estate or sales	ome taxes, self employment taxes, social	\$			
	security takes, and freedome takes. Do not include four estate of sale		Ψ			

26	Other Necessary Expenses: involuntary deductions for deductions that are required for your employment, such as Do not include discretionary amounts, such as voluntary	s retirement contributions, union dues, and uniform costs.	\$		
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.				
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.				
29	Other Necessary Expenses: education for employment the total average monthly amount that you actually expendeducation that is required for a physically or mentally chaproviding similar services is available.	d for education that is a condition of employment and for	\$		
30	Other Necessary Expenses: childcare. Enter the total avechildcare - such as baby-sitting, day care, nursery and presented to the control of t		\$		
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.				
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.				
33	Total Expenses Allowed under IRS Standards. Enter the	he total of Lines 19 through 32.	\$		
	Note: Do not include any experiments the categories set out in lines a-c below that are reasonable dependents.				
34	a. Health Insurance	\$			
	b. Disability Insurance	\$			
	c. Health Savings Account	\$	\$		
	Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$				
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.				
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you				
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local				
38	Education expenses for dependent children less than 18 actually incur, not to exceed \$147.92* per child, for attend school by your dependent children less than 18 years of a documentation of your actual expenses, and you must enecessary and not already accounted for in the IRS Sta	dance at a private or public elementary or secondary ge. You must provide your case trustee with explain why the amount claimed is reasonable and	\$		

 $^{^*}$ Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					\$	
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).					\$	
41	Tota	l Additional Expense Deduc	tions under § 707(b). Enter the total of I	Lines (34 through 40		\$
			Subpart C: Deductions for De	bt P	ayment		
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
	a.	Name of Creditor	Property Securing the Debt	Av		Does payment include taxes or insurance? □yes □no	
	a.				otal: Add Lines	шуез шпо	\$
43	moto your paym sums the fo	r vehicle, or other property not deduction 1/60th of any amounts listed in Line 42, in order in default that must be paid in bullowing chart. If necessary, linear of Creditor	ns. If any of debts listed in Line 42 are secences ary for your support or the support or ant (the "cure amount") that you must payer to maintain possession of the property. In order to avoid repossession or foreclosus additional entries on a separate page. Property Securing the Debt relaims. Enter the total amount, divided by	f your the co The co ure. Li	dependents, you reditor in addition ure amount would st and total any substantial for the standard for the s	a may include in on to the d include any such amounts in e Cure Amount otal: Add Lines	\$
44	prior	ity tax, child support and alin	nony claims, for which you were liable at such as those set out in Line 28.				\$
			ases. If you are eligible to file a case under a by the amount in line b, and enter the re				
45	a. b.	Current multiplier for you issued by the Executive O information is available at the bankruptcy court.)	y Chapter 13 plan payment. r district as determined under schedules ffice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of trative expense of Chapter 13 case	X	al: Multiply Line	es a and b	\$
46	Total	l Deductions for Debt Paym	ent. Enter the total of Lines 42 through 45	5.			\$
			Subpart D: Total Deductions f	rom	Income		
47	Tota	l of all deductions allowed u	nder § 707(b)(2). Enter the total of Lines	33, 4	1, and 46.		\$
		Part VI.	DETERMINATION OF § 707(I	b)(2)	PRESUMPT	ΓΙΟΝ	
48	Ente	r the amount from Line 18 (Current monthly income for § 707(b)(2	3))			\$
49	Ente	r the amount from Line 47 (Total of all deductions allowed under §	707(t	b)(2))		\$
50	Mon	thly disposable income unde	er § 707(b)(2). Subtract Line 49 from Line	e 48 a	nd enter the resu	lt.	\$
51	60-m	——————————————————————————————————————	er § 707(b)(2). Multiply the amount in Li	ine 50) by the number (50 and enter the	\$

	Initial presumption determination. Check the applicable box and proceed as dire	ected.				
52	☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.					
32	The presumption arises" at the top VII. Do not complete the remain					
	☐ The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VI (Lines 53 through 55).					
53	Enter the amount of your total non-priority unsecured debt		\$			
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number	0.25 and enter the result.	\$			
	Secondary presumption determination. Check the applicable box and proceed as	s directed.				
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for of this statement, and complete the verification in Part VIII.	or "The presumption does not aris	e" at the top of page 1			
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.					
	Part VII. ADDITIONAL EXPENSE	CLAIMS				
56	Other Expenses. List and describe any monthly expenses, not otherwise stated in you and your family and that you contend should be an additional deduction from 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figure each item. Total the expenses.	your current monthly income und	er §			
	Expense Description	Monthly Amou	nt			
	a.	\$				
	b.	\$				
	c.	\$				
	d.	\$				
	Total: Add Lines a, b, c, and d \$					
	Part VIII. VERIFICATION					
	I declare under penalty of perjury that the information provided in this statement is	s true and correct. (If this is a join	t case, both debtors			
57	must sign.) Date: November 19, 2012 Signature	e: /s/ Virginia Ramos-Rios				
57	Signature Signature	Virginia Ramos-Rios				
		(Debtor)				

^{*} Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **05/01/2012** to **10/31/2012**.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: New York Life Insurance

Income by Month:

6 Months Ago:	05/2012	\$0.00
5 Months Ago:	06/2012	\$3,069.83
4 Months Ago:	07/2012	\$1,533.41
3 Months Ago:	08/2012	\$1,713.68
2 Months Ago:	09/2012	\$2,866.99
Last Month:	10/2012	\$5,480.07
	Average per month:	\$2,444.00

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Virginia Ramos-Rios	CASE NO.:
Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:		
was pending at any spouses or ex-spous partnership and one have, or within 180	be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1 time within eight years before the filing of the new petition, a ses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are or more of its general partners; (vi) are partnerships which she days of the commencement of either of the Related Cases have estate under 11 U.S.C. § 541(a).]	nd the debtors in such cases: (i) are the same; (ii) are the general partners in the same partnership; (v) are a hare one or more common general partners; or (vii)
■ NO RELATED	CASE IS PENDING OR HAS BEEN PENDING AT ANY T	IME.
☐ THE FOLLOW!	ING RELATED CASE(S) IS PENDING OR HAS BEEN PE	NDING:
1. CASE NO.:	JUDGE: DISTRICT/DIVISION:	
	DING (Y/N): [If closed] Date of closing:	
CURRENT STATI	US OF RELATED CASE:	
	(Discharged/awaiting di	scharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPEI OF RELATED CASE:	RTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT/DIVISION:	
CASE STILL PENI	DING (Y/N): [If closed] Date of closing:	
CURRENT STAT	US OF RELATED CASE:	
	(Discharged/awaiting di	scharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPEI OF RELATED CASE:	RTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT/DIVISION:	
CASE STILL PENI	DING (Y/N): [If closed] Date of closing:	
CURRENT STAT	US OF RELATED CASE:	
	(Discharged/awaiting di	scharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE above):	
REAL PROPERTY	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPEI (OVER)	RTY") WHICH WAS ALSO LISTED IN

DISCLOSURE OF RELATED CASES (cont'd) SCHEDULE "A" OF RELATED CASE:	
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who have be eligible to be debtors. Such an individual will be required to file	
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNE	Y, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/N): <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or debt	tor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy case is as indicated elsewhere on this form.	not related to any case now pending or pending at any time, except
/s/ Melinda D. Middlebrooks, Esq.	
Melinda D. Middlebrooks, Esq. Signature of Debtor's Attorney Middlebrooks Shapiro, P.C. 1767 Morris Avenue, Suite 2A	Signature of Pro Se Debtor/Petitioner
Union, NJ 07083-1716 (908) 687-6161 Fax:(908) 687-9090	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
Failure to fully and truthfully provide all information required by the other petitioner and their attorney to appropriate sanctions, including dismissal of the case with prejudice. NOTE: Any change in address must be reported to the Court immediately.	ng without limitation conversion, the appointment of a trustee or the
resuit.	

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